Cowley College

Employee/Student Travel Request Form

Student Travel Authorization

Allow time for publication at least one week in advance of the trip. Students should contact instructors and make arrangements for any coursework they may miss. Names of students on the list who do not attend the trip should be given to the Academic Affairs Office.

Personnel/Group Traveling		Instructor/ Activity Sponsor			Class Dismissal Time		
		Date/Time of			Date/Time of		
Destination		Departure:			Return		
Purpose of Travel				(School	Request # Dude)		
					·	Emergency Contact	
Stu	udent Name/ID		Emergency	y Contac	t Name	Phone #	
							_
							_
	*Ma	ke additional copies of s	tudent list as n	necessary.			-
<u>Approval check:</u>							
□ Supervisor or Dept. Chair or Athletic Director:					Da	te:	
□ VP Academic Affairs or Outreach Coord:				Date:			